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Bonnett Drew Fully Professional Association

DENNETT DREW FULTE IMMIGRATION & NATURALIZATION PERSONAL INJURY & WRONGFUL DEATH 619 BOUTHWEST 12TH AVENUE MIAMN, FLORIDA 33130 TELEPHONE (308) 658-4733 FAX (308) 658-1986

JERRARD B. CUTRONE OF COUNSEL

August 9, 1995

Florida Department of State Division of Corporations New Filing Section P.O. Box 6327 Tallahassee, Florida 32314

RE: MINOCQUA, INC.

Dear Sir or Madam:

Enclosed please find the Articles of Incorporation for the above-named corporation together with a copy, and our check No.: 22797 in the amount of \$131.25 which represents your fee for a profit corporation.

Thank you for your cooperation in this matter. I await receipt of your certificate as soon as possible.

Sincerely,

BENNETT D. FULTZ

BFD/drj

Encl: as stated

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ARTICLE OF INCORPORATION MINOCQUA, INC.

MITANISSEE FLONIDA The undersigned subscriber to these Articles of Incorporation of MINOCQUA, INC., does hereby form a corporation under the laws of the State of Florida.

ARTICLE I-NAME

The name of the corporation is MINOCQUA, INC.

ARTICLE II-NATURE OF BUSINESS

This corporation may engage in any activity or business permitted under the laws of the United States of America and of the State of Florida.

ARTICLE III-CAPITAL STOCK

The total number of shares of stock which the corporation shall have authority to issue is One Hundred (100) shares, a \$1.00 per share. All such shares are of one class and are common stock.

ARTICLE IV-TERMS OF EXISTENCE

This corporation is to have perpetual existence.

ARTICLE V-ADDRESS

The initial post office address of the principal office of this corporation in the State of Florida is 619 S.W. 12th Avenue, Miami, Florida 33130. The registered agent of the corporation will be BENNETT D. FULTZ, and for the purposes of receiving service of process the registered office of this corporation is 619 S.W. 12th Avenue, Miami, Florida 33130.

ARTICLE VI-INITIAL DIRECTORS

This corporation shall have one director initially.

(A NATURAL PERSON OVER 18 YEARS OLD). The number of directors may be increased or diminished from time to time as provided by by-laws adopted by the stockholders.

ARTICLE VII-INITIAL DIRECTOR

The name and post office address of the member of the first board of director is:

NAME AND ADDRESSE

POSITION

Betty Miller 619 S.W. 12th Avenue Miami, Florida 33130 President/Secretary

ARTICLE VIII-SUBSCRIBER

The name and address of the subscriber of these Articles of Incorporation, the number of shares of stock is agree to take and the value of the consideration thereof:

NAME AND ADDRESS:	SHARES	CONSIDERATION
Betty Miller 619 S.W. 12th Avenue Miami, Florida 33130	100	\$100.00

ARTICLE IX-AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the board of director, proposed by it to the stockholder, and approved by the board of director, at a stockholder's meeting by a majority of the stock entitled to vote thereon, unless all directors and all the stockholders signed a written statement manifesting their intention that a certain amendment of these articles of incorporation is made.

IN WITNESS WHEREOF, the undersigned, being the original subscriber to the capital stock hereinahove named for the purposes of forming a corporation to do business in the State of Florida, does make and files these Articles of Incorporation hereby declaring and certifying the facts and things contained therein are true and agree to take the number of shares hereinabove set forth, hereunto set her hand and seal this day of August, 1995.

BETTY MILLER President/Secretary

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLE OF INCORPORATION

I, BENNETT D. FULTZ hereby am familiar with an accept the duties and responsibilities as registered agent for said corporation.

RENNETT D. FULTZ

STATE OF FLORIDA)
SS
COUNTY OF DADE)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the state aforesaid and in the county aforesaid to take acknowledgments, personally appeared BETTY MILLER and BENNETT D. FULTZ who are personally known to me and known to be the persons described in, and who executed the foregoing instrument and acknowledgment before me that they executed same for the purposes therein expressed.

WITNESS my hand and official seal in the county and state aforesaid on this day of August, 1995.

last aforesaid on this

MY COMMISSION EXPIRES:

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